

Racial and Ethnic Discrimination in Health Care Settings

A Special Health Report by
Public Health - Seattle & King County

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-Calling (206) 296-6817 (voice) or 296-4600 (TDD)
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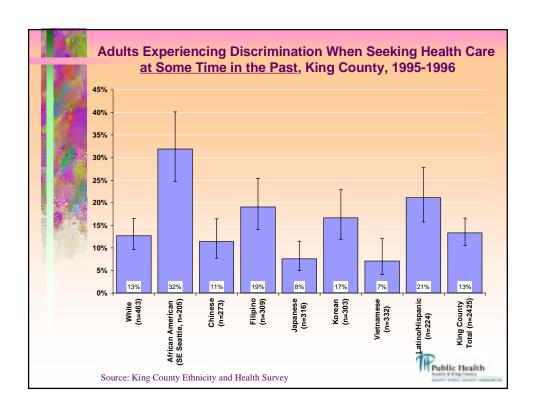


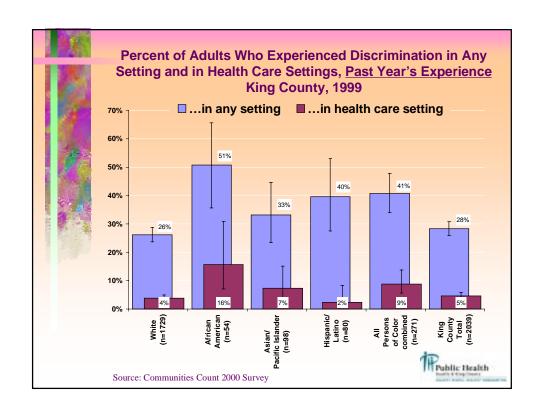
Where does our information come from?

- Random surveys of King County residents
 - Ethnicity and Health Survey
 - Included 2,400 adults, 1995-1996
 - Communities Count 2000 Survey
 - Included 1,500 adults, late 1999
- Personal Interviews
 - Interview Project
 - Included 51 African Americans, Jul-Sep 1999
 - Intended to describe range of experiences













Interview Project Findings Experiences Reported by 51 African Americans

- Experiences ranged from incidents of differential treatment to rude behavior and racial slurs.
- Most respondents were surprised by the incidents; they did not expect this type of treatment and considered the personal impact to be very severe.
- Many respondents had more than one story.
- Most of the events reported are recent.
- All events were perceived to be racially motivated.
- The events reported occurred in 30 facilities, both public and private, located all over King County





Examples of reported experiences:

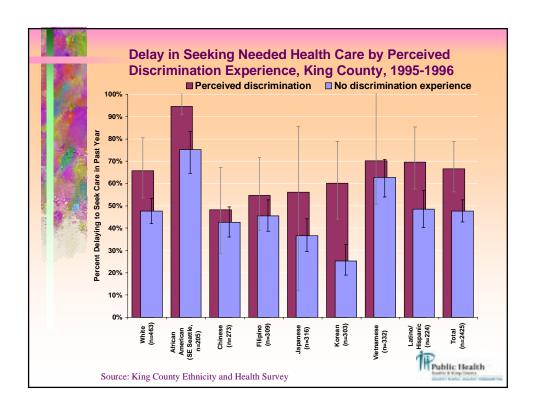
- "He treated the Caucasian woman better and differently."
- "The radiologist made a couple of crude remarks, like I was dumb."
- "I was in the emergency room at the hospital and I feel that I was ignored due to my race."
- "I know you shoot dope," a nurse was reported to have accused one of the respondents.
- "You people accepted pain as part of slavery because you tolerate pain so well," said a nurse to a respondent who before having a breast biopsy requested a sedative due to a low tolerance for pain.



What was the response to the reported event?

- About half made a complaint. Most were verbal; few were written or formal.
- Many respondents mentioned actively avoiding offending personnel and/or facilities where the incident took place.
- Some respondents reported delaying treatment due to the negative experience.







Comments from respondents:

- "I vowed never to take my child to _____
 Hospital."
- "It was the last time my son would see Dr.
- "I was so ticked off when I went home that I cut up my _____ card."
- "I have not sought surgery for my other leg. I would like surgery but I guess that I'll find someone else. Sometimes my leg hurts."





To What Extent does Perceived Discrimination Reflect Differential Treatment or Access to Quality Care?

Answer:

We don't have good local data to determine this.





Differential Treatment and Access to Medical Care by Race and Ethnicity

- •A review of hundreds of studies conducted in different parts of the county indicated significant differences in medical care received by persons of different racial and ethnic background.
- Differential treatment and access to care in most studies could not be "explained by such factors as socioeconomic status, insurance coverage, stage or severity of disease, comorbidities, type and availability of health care services, and patient preferences."

(Mayberry et al., Med Care Res Rev 2000)





Examples of Differential Treatment and Access

Heart Disease

 With respect to by-pass operations, in five studies African Americans were 32% to 80% less likely to receive these operations compared to whites with similar disease severity.

• Cancer

- Several studies have documented differences with respect to certain types of cancer (e.g., lung and colon). African Americans were often less likely to receive major therapeutic procedures.
- One study of nursing homes found African Americans with cancer to be 63% less likely to receive any pain medication.

(Mayberry et al., Med Care Res Rev 2000)





Recommendations

- Train health <u>all</u> care providers and support staff in cultural competency
 - Incorporate cultural competency measures in individual performance evaluations.
 - Periodically evaluate training to improve effectiveness.
 - Providers should be able to respectfully obtain cultural and ethnic heritage information of clients when this information is a necessary component of quality service.





Recommendations

- Change institutional policies in order to:
 - Maintain a non-discriminatory workplace
 - Assure a diverse workforce at all levels
 - Promote awareness among consumers regarding rights and grievance processes
 - Require subcontractors to report on racial and ethnic background.





Recommendations

- Continue studies that will contribute to eliminating discrimination by:
 - Collecting information routinely regarding race and ethnic background
 - Monitoring and reporting differential treatment
 - Examining and reporting experiences of other racial and ethnic groups.





Public Health - Seattle & King County

- Action Steps:
 - Ensure that recommendations are met within Public Health Seattle & King County.
 - Disseminate findings widely
 - Co-sponsor a major community forum with several other community organizations
 - Work with other organizations to incorporate effective strategies to eliminate discrimination through the King County Health Action Plan
 - Continue to monitor discrimination experiences

